

slight solubility of the double cyanide in serum, some of the very soluble cyanide of mercury was associated with it. Some admirable results were got with this "cyanide gauze," but it was found to cause irritation of a peculiar kind, and suppurations also sometimes occurred at a late period of the case, such as Sir Joseph had never been accustomed to with carbolic dressings. It was found that this could be prevented by first saturating the gauze with the double cyanide and then putting it into a solution of starch. This fixed the particles of the cyanide most effectually in the gauze, subsequently the double cyanide and starch were prepared with sulphate of potassium; in this way the mixed salts could be powdered and easily diffused in water. This compound should be moistened before use with a $\frac{1}{4000}$ solution of sublimate, so as to destroy any organisms there might be in the dressing. The layer destined to be put next the skin is washed in a solution of carbolic acid; this washes out the sublimate. By this means Sir Joseph Lister said he had obtained perfect results in practice in wounds of every description.—*London Medical Recorder*, November 20, 1889.

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III. Are our Common Dry and Impregnated Dressings Sterile and Can They Sterilize the Secretions of Wounds?

By EDWARD EHLERS. The writer has, like v. Eiselberg and Schlange, made bacterioscopic investigations of various antiseptic dressing-materials. Without going into details we merely direct attention to the results of these investigations:

1. Antiseptically prepared dressing materials, which are dried and kept in a dried state, cannot be regarded as sterile on account of the impregnation.
2. One should never depend entirely upon the impregnation, but the raw material should be boiled or steamed.
3. If one will use dry materials then they should be sterilized after drying, by some dry process.

The impregnated materials cannot be sterilized by means of steam as the antiseptic would be carried away by the vapor. The use of antiseptic dressings in a dry state is essentially a limited one on ac-

count of the volatility of several antiseptics; iodoform and salicylic acid preparations cannot be sterilized by heating at all, carbolic acid preparations only with difficulty; the corrosive sublimate preparations, however, may be best sterilized by heating.

The writer sought to obtain a sterilization of raw iodoform by heating the powder in closed glasses for an hour at $85-90^{\circ}$ c. In some of these experiments bacterioscopic examination showed the result to be satisfactory.

With regard to the capability of our ordinary corrosive sublimate dressing materials to sterilize septic fluids secreted from wounds, he found that sublimate gauze containing 4% of this antiseptic *did not possess this property at all*. Carbolyzed gauze (20%) gave a little better yet an entirely uncertain result. "But," says the writer in closing, "if the asepsis of our dry dressing materials be uncertain and entirely accidental, and the antiseptic action a minimal one, why do we use an antiseptic preparation?"

He recommends the procedure long since used in v. Bergmann's clinic of sterilizing the unimpregnated materials, by means of steam; a similar procedure has also been used for several years by Prof. Bloch in Copenhagen.

IV. On Remedies for Neutralization of the Tetanic Virus and the Surgical Prophylaxis of Tetanus. By G. SORMANI (Naples). In an earlier series of experiments published in August, 1889, Sormani found that iodoform was one of the most energetic disinfectants of the tetany producing virus, and that iodol and an acid (20%) solution of corrosive sublimate were similar in their action. A second series of experiments has shown that also chloral, chloralium, camphoratum and chloroform had a similar power, while camphor and spiritus camphoratus had no favorable action. Since then Prof. Maz-zuschelli has used iodoform (locally) in two cases which in and towards the end of May, 1889, came under treatment.

In one case a girl while working in a garden with a spade inflicted upon herself a large torn wound in the calf of the right leg. Eight days after tetanus made its appearance and she was taken into